

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>(ms)</i>	<i>6270-4</i>	<i>3/2/00</i>
O.I.P.E. CLASSIFIER		<i>73</i>	<i>3/17/00</i>
FORMALITY REVIEW		<i>624177</i>	<i>4-25-00</i>
RESPONSE FORMALITY REVIEW		<i>624177</i>	<i>6-21-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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50	✓

Claim	Date
Final Original	
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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